Interim Clinical Commissioning Policy: Knee replacement

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Interim Clinical Commissioning Policy

Knee replacement

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Policy Statement

NHS England will commission treatments for Knee Replacement in accordance with the criteria outlined in this document.

In creating this policy NHS England has reviewed this clinical condition and the options for its treatment. It has considered the place of this treatment in current clinical practice, whether scientific research has shown the treatment to be of benefit to patients, (including how any benefit is balanced against possible risks) and whether its use represents the best use of NHS resources.

This policy document outlines the arrangements for funding of this treatment for patients where NHS England directly commissions this service.

Equality Statement

NHS England has a duty to have regard to the need to reduce health inequalities in access to health services and health outcomes achieved as enshrined in the Health and Social Care Act 2012. NHS England is committed to ensuring equality of access and non-discrimination, irrespective of age, gender, disability (including learning disability), gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation. In carrying out its functions, NHS England will have due regard to the different needs of protected equality groups, in line with the Equality Act 2010. This document is compliant with the NHS Constitution and the Human Rights Act 1998. This applies to all activities for which they are responsible, including policy development, review and implementation.

Plain Language Summary

Knee replacement surgery (arthroplasty) involves replacing a damaged, worn or diseased knee with an artificial joint.

1. Introduction

Knee replacement surgery is regarded as a procedure of low clinical priority and therefore not routinely funded by the Commissioner. Oxford score of 30 or greater is a significant measure of disability but is not a measure for assessing need for joint replacement.
2. Criteria for commissioning

NHS England will fund Joint replacement for people who experience joint symptoms (pain, stiffness and reduced function) when:

There is evidence that conservative means have failed to alleviate pain and disability

AND

Symptoms have a substantial impact on their quality of life

AND

Symptoms are refractory to non-surgical treatment.

AND

The prostheses used are standard.

AND

Patient is a confirmed non-smoker

AND

Patient has a BMI < 30

Referral should be made before there is prolonged and established functional limitation and severe pain

The clinician proposing this intervention will make the decision to treat based on the criteria set out above.

If the patient does not fully meet this criteria the clinician may submit an application for exceptional funding


An annual audit will be completed to confirm that patients have been treated in accordance with these criteria.

3. Evidence Base

This procedure is considered to be of limited clinical value.